

#18  
08/18/03

SB/Amth/C

## TELEFAX COVER SHEET

## MOSER, PATTERSON &amp; SHERIDAN, LLP

ATTORNEYS AT LAW  
595 SHREWSBURY AVENUE  
FIRST FLOOR  
SHREWSBURY, NJ 07702  
TELEPHONE (732) 530-9404  
TELEFAX (732) 530-9808

RECEIVED

AUG 12 2003

Technology Center 2100

\*\*\*\*\*  
THIS TELEFAX MESSAGE IS ADDRESSED TO THE PERSON OR COMPANY LISTED BELOW.  
IF IT WAS SENT OR RECEIVED INCORRECTLY, OR YOU ARE NOT THE INTENDED  
RECIPIENT, PLEASE TAKE NOTICE THAT THIS MESSAGE MAY CONTAIN PRIVILEGED OR  
CONFIDENTIAL MATERIAL, AND YOUR DUE REGARD FOR THIS INFORMATION IS  
NECESSARY. YOU MAY ARRANGE TO RETURN THIS MATERIAL BY CALLING THE FIRM  
LISTED ABOVE AT (732) 530-9404  
\*\*\*\*\*

THIS MESSAGE HAS 14 PAGES INCLUDING THIS SHEET

TO: Commissioner for Patents

FAX NO.: 703-746-7239

FROM: Eamon J. Wall

DATE: August 12, 2003

MATTER: Serial No. 09/500,698 Filed: 2/9/00

DOCKET NO.: LIBE/APP19US

APPLICANT: Bulkowski

OFFICIAL

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

☐ Petition  
☐ Disclosure Statement & PTO-1449  
☐ Priority Document  
☐ Drawings ( sheets)  
☒ RESPONSE UNDER SUPPLEMENTAL  
RESPONSE UNDER 37 C.F.R. 1.111  
☐ REQUEST FOR 1 MONTH EXTENSION

☒ Transmittal Letter (2 copies)  
☐ Fee Transmittal (2 copies)  
☐ Deposit Account Transaction  
☒ Facsimile Transmission Certificate  
dated 8/12/03

## CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being transmitted by facsimile to the Commissioner for  
Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 8/12/03, Facsimile No. 703-746-7239.

LAURA E. CRATER  
Name of person signing this certificate

Laura E. Crater 8/12/03  
Signature and date

PTO/SB/21 (08-00)

Please type a plus sign (+) inside this box → ☐

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM/EXTENSION REQUEST</b>  (to be used for all correspondence after initial filing)	Application Number	09/500,698
	Filing Date	2/9/00
	First Named Inventor	Bulkowski
	Group Art Unit	2143
	Examiner Name	A.L. Baugh
Total Number of Pages in This Submission	Attorney Docket Number	LIBE/APP19US

  

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response (SUPPLEMENTAL)  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request -  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Facsimile Cover Sheet with Certificate of Transmission</b>
Remarks	Applicant(s) does not believe that any fee is due. In the event Applicant(s) is Incorrect, please charge any fees due to make this response timely and acceptable to the Office to deposit Account 20-0782. To facilitate that charge, a duplicate copy of this transmittal is enclosed.	

  

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Eamon J. Wall, Reg. No. 39,414
Signature	<i>E. J. Wall</i>
Date	8/12/03

IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE

**PATENT APPLICATION**

Applicant(s): **Bulkowski**  
Case: **LIBE/APP19US**  
Serial No.: **09/500,698** Filed: **2/9/00**  
Examiner: **A.L. Baugh** Group Art Unit: **2143**  
Title: **BROADCAST DISTRIBUTION USING LOW-LEVEL OBJECTS  
AND LOCATOR TABLES**

**SUPPLEMENTAL RESPONSE UNDER 37 C.F.R. 1.111**

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Arlington, VA 22313-1450

S I R:

This is in supplemental response to the Office Action mailed March 20, 2003 (Paper No. 14), and further to the undersigned's telephone conference with Examiner Baugh on August 8, 2003. Please amend the above-identified patent application as follows. Although applicant does not believe that any fee is due, if applicant is incorrect the Commissioner is authorized to charge any fees due to Deposit Account No. 20-0782.